# STATE OF ALASKA

#### DEPARTMENT OF HEALTH AND SOCIAL SERVICES

DIVISION OF PUBLIC ASSISTANCE

SARAH PALIN, GOVERNOR

FAMILY NUTRITION PROGRAMS - WIC 130 Seward Street, Room 508 P.O. BOX 110612 JUNEAU, AK 99811-0612 PHONE: (907) 465-3100 FAX: 465-3416

Reply to: All Local Agencies Memorandum No-08-09

Date:

May 15, 2008

TO:

X-LA WIC Coordinators

X-Satellites

FROM:

Kathleen Wayne

State WIC Manager

Information- X

Policy- X

**Action-Immediately** 

Routine (email and hard copy) - X

Urgent (fax and hard copy)-

SUBJECT: Clarification on HIPAA requirements for WIC agencies

After the FY 2006 State Technical Assistance Review by USDA, the following clarification was provided for Alaska WIC grantees regarding the Health Insurance Portability and Accountability Act (HIPAA) requirements.

Grantees participating in the Alaska Women, Infants, and Children Supplemental Nutrition Program are expected to comply with Grant Award document, Appendix C; 7 C.F.R., part 246.7 (i)(11); 246.26(d); and State Statutes 7 AAC 78.250 regarding client confidentiality.

Confidential client information, whether electronic or paper, should be retained and protected in a safe and secure manner.

If you as a WIC grantee are not a covered entity under HIPPA (that is you are not a health care provider that submits health information electronically in compliance with HIPAA's transactions and codes set regulations), Appendix C in no way intends to subject your organization to HIPPAA. Neither does it subject your organization to 42 C. F. R. Part 2 if you are not a substance abuse treatment program. As you are aware, WIC regulations directly govern the confidentiality of client records and those are the regulations your organization should apply.

If as a WIC grantee, you are part of a larger organization that is a HIPPAA covered entity or that also operates a substance abuse treatment program, we request that you consult your legal counsel and determine the best course to following when exchaning information permitted by the WIC confidentiality regulations. At no point, however, may WIC grant funds be utilized to implement and enforce HIPAA or 42 C.F.R. Part 2.

Attachments: SS 7 AAC 78.250

7 CRF 246.26(d) 7 CFR 246.7(i)(11)

Appendix C

- **7 AAC 78.250. Retention of records.** (a) The grantee shall ensure that its records, and the records of each subcontractor under 7 AAC 78.180, are protected and preserved as required by this chapter and other applicable state and federal law. The grantee shall safeguard confidential information and ensure that any disclosure of that information is made in a manner that is permissible under applicable state and federal law.
- (b) The grantee shall retain and preserve financial and administrative grant records, including records of the receipt and disposition of grant income that are necessary to meet auditing requirements, for at least three years, subject to the following:
- (1) the grantee shall retain the records as long as an audit is in progress or as long as audit findings, litigation, or claims involving the records are pending;
- (2) the grantee shall retain records for nonexpendable personal property of the grant project for at least three years after the final disposition of that property or appropriate reimbursement for that property to the state;
- (3) the retention period for each year's records begins on the date of submission to the department of the grantee's annual or final financial status report or its equivalent.
- (c) The grantee shall retain and preserve records that relate directly to the care and treatment of a recipient of services for at least seven years following the termination of services to that recipient, subject to the following:
- (1) if the grantee or subcontractor is a hospital subject to AS 18.20.085, the grantee shall retain the records in accordance with AS 18.20.085;
- (2) if the grantee or subcontractor is not a hospital subject to AS 18.20.085, and if a recipient of services is under the age of majority, the records must be kept for at least seven years after the recipient has reached the age of majority or until seven years after the termination of services, whichever is longer.
- (d) If records described in this section are transferred under 7 AAC 78.255, any continuing board, officers, or successor organization must protect, retain, and preserve those records as required by this section through at least the applicable retention period that would have applied to those records if they had not been transferred.

in the Program by category (i.e., pregnant, breastfeeding and postpartum women, infants and children) within each priority level (as established in §246.7(e)(4)) and by migrant farmworker households.

- (ii) Civil rights report. Racial and ethnic participation data contained in the biennial participant characteristics report will also be used to fulfill civil rights reporting requirements.
- (c) Other reports. State agencies must submit reports to reflect additions and deletions of local agencies administering the WIC Program and local agency address changes as these events occur.
- (d) Source documentation. To be acceptable for audit purposes, all financial and Program performance reports shall be traceable to source documentation.
- (e) Certification of reports. Financial and Program reports shall be certified as to their completeness and accuracy by the person given that responsibility by the State agency.
- (f) Use of reports. FNS will use State agency reports to measure progress in achieving objectives set forth in the State Plan, and this part, or other State agency performance plans. If it is determined, through review of State agency reports, Program or financial analysis, or an audit, that a State agency is not meeting the objectives set forth in its State Plan, FNS may request additional information including, but not limited to, reasons for failure to achieve its objectives.
- (g) Extension of reporting deadline. FNS may extend the due date for any Financial and Participation Report upon receiving a justified request from the State agency. The State agency should not wait until the due date if an extension is to be requested, but should submit the request as soon as the need is known. Failure by a State agency to submit a report by its due date may result in appropriate enforcement actions by FNS in accordance with §246.19(a)(2), including withholding of

further grant payments, suspension or termination of the grant.

[50 FR 6121, Feb. 13, 1985, as amended at 52 FR 21238, June 4, 1987; 53 FR 15653, May 3, 1988; 59 FR 1508, Mar. 11, 1994; 65 FR 53528, Sept. 5, 2000; 71 FR 56731, Sept. 27, 2006; 72 FR 24183, May 2, 2007]

#### § 246.26 Other provisions.

- (a) No aid reduction. The value of benefits or assistance available under the Program shall not be considered as income or resources of participants or their families for any purpose under Federal, State, or local laws, including, but not limited to, laws relating to taxation, welfare and public assistance programs.
- (b) Statistical information. FNS reserves the right to use information obtained under the Program in a summary, statistical or other form which does not identify particular individuals.
- (c) Medical information. FNS may require the State or local agencies to supply medical data and other information collected under the Program in a form that does not identify particular individuals, to enable the Secretary or the State agencies to evaluate the effect of food intervention upon low-income individuals determined to be at nutritional risk.
- (d) Confidentiality of applicant and participant information—(1) WIC purposes. (i) Confidential applicant and participant information is any information about an applicant or participant, whether it is obtained from the applicant or participant, another source, or generated as a result of WIC application, certification, or participation, that individually identifies an applicant or participant and/or family member(s). Applicant or participant information is confidential, regardless of the original source and exclusive of previously applicable confidentiality provided in accordance with other Federal, State or local law.
- (ii) Except as otherwise permitted by this section, the State agency must restrict the use and disclosure of confidential applicant and participant information to persons directly connected with the administration or enforcement of the WIC Program whom the State agency determine have a

need to know the information for WIC Program purposes. These persons may include, but are not limited to: personnel from its local agencies and other WIC State or local agencies; persons under contract with the State agency to perform research regarding the WIC Program, and persons investigating or prosecuting WIC Program violations under Federal, State or local

- (2) Non-WIC purposes. (i) Use by WIC State and local agencies. Any WIC State or local agency may use confidential applicant and participant information in the administration of its other programs that serve persons eligible for the WIC Program in accordance with paragraph (h) of this section.
- (ii) Disclosure to public organizations. The State agency and its local agencies may disclose confidential applicant and participant information to public organizations for use in the administration of their programs that serve persons eligible for the WIC Program in accordance with paragraph (h) of this section.
- (3) Child abuse and neglect reporting. Staff of the State agency and its local agencies who are required by State law to report known or suspected child abuse or neglect may disclose confidential applicant and participant information without the consent of the participant or applicant to the extent necessary to comply with such law.
- (4) Release forms. Except in the case of subpoenas or search warrants (see paragraph (i) of this section), the State agency and its local agencies may disclose confidential applicant and participant information to individuals or entities not listed in this section only if the affected applicant or participant signs a release form authorizing the disclosure and specifying the parties to which the information may be disclosed. The State or local agency must permit applicants and participants to refuse to sign the release form and must notify the applicants and participants that signing the form is not a condition of eligibility and refusing to sign the form will not affect the applicant's or participant's application or participation in the WIC Program. Release forms authorizing disclosure to private physicians or other health care

providers may be included as part of the WIC application or certification process. All other requests for applicants or participants to sign voluntary release forms must occur after the application and certification process is completed.

- (5) Access to information by applicants and participants. The State or local agency must provide applicants and participants access to all information they have provided to the WIC Program. In the case of an applicant or participant who is an infant or child, the access may be provided to the parent or guardian of the infant or child, assuming that any issues regarding custody or guardianship have been settled. However, the State or local agency need not provide the applicant or participant (or the parent or guardian of an infant or child) access to any other information in the file or record such as documentation of income provided by third parties and staff assessments of the participant's condition or behavior, unless required by Federal, State, or local law or policy or unless the information supports a State or local agency decision being appealed pursuant to §246.9.
- (e) Confidentiality of vendor information. Confidential vendor information is any information about a vendor (whether it is obtained from the vendor or another source) that individually identifies the vendor, except for vendor's name, address and authorization status. Except as otherwise permitted by this section, the State agency must restrict the use or disclosure of confidential vendor information to:
- (1) Persons directly connected with the administration or enforcement of the WIC Program or the Food Stamp Program who the State agency determines have a need to know the information for purposes of these programs. These persons may include personnel from its local agencies and other WIC State and local agencies and persons investigating or prosecuting WIC or Food Stamp Program violations under Federal, State, or local law;
- (2) Persons directly connected with the administration or enforcement of any Federal or State law. Prior to releasing the information to one of these parties (other than a Federal agency),

as elimination of new certifications) before taking such action. In discontinuing benefits, the State agency will affect the least possible number of participants and those whose nutritional and health status would be least impaired by the action. When a State agency elects to discontinue benefits due to insufficient funds, it will not enroll new participants during that period. The State may discontinue benefits by:

- (A) Disqualifying a group of participants; and/or,
- (B) Withholding benefits from a group with the expectation of providing benefits again when funds are available.
- (i) Certification forms. All certification data for each person certified shall be recorded on a form (or forms) which are provided by the State agency. The information on the forms shall include—
  - (1) Name and address;
- (2) Date of initial visit to apply for participation:
- (3) An indication of whether the applicant was physically present at certification and, if not, the reason why an exception was granted or a copy of the document(s) in the file which explains the reason for the exception:
- (4) A description of the document(s) used to determine residency and identity or a copy of the document(s) used or the applicant's written statement when no documentation exists;
- (5) Information regarding income eligibility for the Program as specified in paragraph (d) of this section as follows:
- (i) A description of the document(s) used to determine income eligibility or a copy of the document(s) in the file;
- (ii) An indication that no documentation is available and the reason(s) why or a copy of the applicant's written statement explaining such circumstances; or
- (iii) An indication that the applicant has no income.
- (6) The date of certification and the date nutritional risk data were taken if different from the date of certification;
- (7) Height or length, weight, and hematological test results;
- (8) The specific nutritional risk conditions which established eligibility for the supplemental foods. Documenta-

tion should include health history when appropriate to the nutritional risk condition, with the applicant's or applicant's parent's or caretaker's consent:

(9) The signature and title of the competent professional authority making the nutritional risk determination, and, if different, the signature and title of the administrative person responsible for determining income eligibility under the Program; and

(10) A statement of the rights and obligations under the Program. The statement must contain a signature space, and must be read by or to the applicant, parent, or caretaker. It must contain the following language or alternate language as approved by FNS (see §246.4(a)(11)(i)), and be signed by the applicant, parent, or caretaker after the statement is read:

I have been advised of my rights and obligations under the Program. I certify that the information I have provided for my eligility determination is correct, to the best of my knowledge. This certification form is being submitted in connection with the receipt of Federal assistance. Program officials may verify information on this form. I understand that intentionally making a false or misleading statement or intentionally misrepresenting, concealing, or withholding facts may result in paying the State agency, in cash, the value of the food benefits improperly issued to me and may subject me to civil or criminal prosecution under State and Federal law.

- ((11))If the State agency exercises the authority to use and disclose confidential applicant and participant information for non-WIC purposes pursuant to §246.26(d)(2), a statement that:
- (i) Notifies applicants that the chief State health officer (or the governing authority, in the case of an Indian State agency) may authorize the use and disclosure of information about their participation in the WIC Program for non-WIC purposes;
- (ii) Must indicate that such information will be used by State and local WIC agencies and public organizations only in the administration of their programs that serve persons eligible for the WIC Program; and,
- (iii) Will be added to the statement required under paragraph (i)(10) of this section. This statement must also indicate that such information can be used

by the recipient organizations only for the following:

- (A) To determine the eligibility of WIC applicants and participants for programs administered by such organizations:
- (B) To conduct outreach for such programs;
- (C) To enhance the health, education, or well-being of WIC applicants and participants currently enrolled in those programs;
- (D) To streamline administrative procedures in order to minimize burdens on participants and staff; and,
- (E) To assess and evaluate a State's health system in terms of responsiveness to participants' health care needs and health care outcomes.
- (j) Notification of participant rights and responsibilities. In order to inform applicants and participants or their parents or caretakers of Program rights and responsibilities, the following information shall be provided. Where a significant number or proportion of the population eligible to be served needs the information in a language other than English, reasonable steps shall be taken to provide the information in appropriate languages to such persons, considering the scope of the Program and the size and concentration of such population.
- (1) During the certification procedure, every Program applicant, parent or caretaker shall be informed of the illegality of dual participation.
- (2) At the time of certification, each Program participant, parent or caretaker must read, or have read to him or her, the statement provided in paragraph (i)(10) of this section (or an alternate statement as approved by FNS). In addition, the following sentences (or alternate sentences as approved by FNS) must be read:
- (i) "Standards for eligibility and participation in the WIC Program are the same for everyone, regardless of race, color, national origin, age, handicap, or sex."
- (ii) "You may appeal any decision made by the local agency regarding your eligibility for the Program."
- (iii) "The local agency will make health services and nutrition education available to you, and you are encouraged to participate in these services."

- (3) If the State agency implements the policy of disqualifying a participant for not picking up supplemental foods or food instruments in accordance with paragraph (h)(1)(ii) of this section, it shall provide notice of this policy and of the importance of regularly picking up food instruments or supplemental foods to each participant, parent or caretaker at the time of each certification.
- (4) At least during the initial certification visit, each participant, parent or caretaker shall receive an explanation of how the local food delivery system operates and shall be advised of the types of health services available, where they are located, how they may be obtained and why they may be useful.
- (5) Persons found ineligible for the Program during a certification visit shall be advised in writing of the ineligibility, of the reasons for the ineligibility, and of the right to a fair hearing. The reasons for ineligibility shall be properly documented and shall be retained on file at the local agency.
- (6) A person who is about to be suspended or disqualified from program participation at any time during the certification period shall be advised in writing not less than 15 days before the suspension or disqualification. Such notification shall include the reasons for this action, and the participant's right to a fair hearing. Further, such notification need not be provided to persons who will be disqualified for not picking up supplemental foods or food instruments in accordance with paragraph (h)(1)(ii) of this section.
- (7) When a State or local agency pursues collection of a claim pursuant to §246.23(c) against an individual who has been improperly issued benefits, the person shall be advised in writing of the reason(s) for the claim, the value of the improperly issued benefits which must be repaid, and of the right to a fair hearing.
- (8) Each participant, parent or caretaker shall be notified not less than 15 days before the expiration of each certification period that certification for the Program is about to expire.
- (9) If a State agency must suspend or terminate benefits to any participant during the participant's certification

### APPENDIX C ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES PRIVACY AND SECURITY PROCEDURES FOR GRANTEES

#### POLICY:

This policy and its accompanying procedures are based on the following: (1) DHSS's obligations under the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations ("HIPAA") to protect the privacy and security of protected health information (2) where applicable, the obligations of grantees under HIPAA; (3) where applicable, the obligations of grantees that are federally assisted alcohol and drug abuse programs and subject to the confidentiality protections of 42 C.F.R. Part 2; and (4) obligations for records retention and transfer of records codified as 7 AAC 78.250 - 78.255.

It is the policy of DHSS that the following procedures be incorporated as terms of DHSS's grant agreements. When used in the accompanying procedures, the following terms shall be defined as set forth at 45 C.F.R. Part 160: "electronic protected health care information," "protected health information," "use," "disclosure," and "workforce." The following terms shall be defined as set forth at 45 C.F.R. Part 164: "availability" "confidentiality," "integrity," "security," and "health oversight agency."

#### **PROCEDURES:**

- 1. <u>Security Practices</u>. The grantee that creates, receives, maintains, or transmits electronic protected health information in its role as grantee shall undertake the following acts regarding such information:
  - a. Ensure the information's confidentiality, integrity, and availability.
  - b. Protect against any reasonably anticipated threats or hazards to the security or integrity of such information, including during its transmission to and from the grantee.
  - c. Protect against reasonably anticipated uses or disclosures of such information when the use or disclosure is not required or permitted by law.
  - d. Implement protections that govern the receipt, removal, disposition, and re-use of hardware and electronic media (which includes, but is not limited to hard disks, magnetic tapes, compact disks, videotapes, audiotapes, handheld electronic devices and removable storage devices such as floppy disks and zip disks) that contain or have contained electronic protected health information. In particular, the grantee shall:
    - ensure that all hardware used or electronic media developed by the grantee for the grant project be cleaned with a wipe utility that prevents the recovery of any information from the device, prior to the hardware or device being re-used, salvaged, surplused, or disposed.
    - ii. For each piece of hardware or electronic media to be re-used, salvaged, surplused, or disposed, furnish a Disposal Assurance Form (attached as Exhibit 1 to these procedures) to the contact person named in Item 10.b. of the Grant Agreement.

- e. Ensure that its workforce protect the security of such information.
- 2. <u>Privacy Practices</u>. The Grantee that creates, receives, maintains, or transmits protected health information in its role as grantee shall undertake the following acts regarding such information:
  - a. Establish physical, technical, and administrative safeguards that prevent the improper use or disclosure of the information, including:
    - i. designating a person or persons to be responsible for assuring the privacy of the information;
    - ii. developing and implementing privacy policies and procedures regarding required and permissible use and disclosure of the information;
    - iii. identifying a contact person responsible for receiving complaints, appropriately investigating, and, if necessary, taking prompt corrective action to cure any deficiencies that result from breaches of security, intrusion, or unauthorized use or disclosure of grant recipient information;
    - iv. Permitting the disclosure of the information to DHSS as a health oversight agency (without requiring the authorization of a recipient of services) for purposes of DHSS's determination of grant compliance, grant administration, grant termination, or grant assignment.
    - v. Promptly furnishing a Notification of Suspected Breach Form (attached as Exhibit 2 to these procedures) to the contact person named in Item 10.b. of the Grant Agreement if the Grantee suspects breach of security, intrusion, or unauthorized use or disclosure of grant recipient information.
  - b. Take reasonable steps to mitigate the harmful effects of any improper use or disclosure of the information.
  - c. Discipline workforce that violate the grantee's privacy policies and procedures.
  - d. Not coerce, discriminate, or retaliate against any person for exercising his or her rights regarding such information or for reporting any alleged violation of the grantee's privacy policies and procedures.
- 3. <u>Substance Abuse Treatment Records</u>. DHHS is mindful that some grantees are subject to 42 C.F.R. Part 2, because they are in receipt of federal funds for the operation of alcohol and drug abuse programs. Such grantees shall undertake the following acts regarding protected health information concerning such programs for which the grantee also receives grant funding from DHSS:
  - a. protect the confidentiality of alcohol and drug abuse patient records as required by 42 C.F.R. Part 2, including:

- i. restricting the use and disclosure of information, whether recorded or not, which would identify a patient as an alcohol or drug abuser, all as permitted or required by 42 C.F.R. Part 2;
- ii. providing security for written records as required by 42 C.F.R. § 2.16;
- iii. adopting written procedures which regulate and control access to and use of written records, as required by 42 C.F.R. § 2.16(b);
- iv. applying the restrictions for disclosures of information with patient consent, as set forth at 42 C.F.R. §§ 2.31 2.35; and
- v. applying the restrictions for disclosures without patient consent, as set forth at 42 C.F.R. §§ 2.51 -2.67.
- b. resolve any conflict between these procedures or any other law in favor of the protection of the confidentiality of alcohol and drug abuse patient records.
- 4. Retention of Records. The Grantee shall undertake the following acts:
  - a. Retain documents relating to the grantee's privacy and security practices for six years.
  - b. Ensure that its records are retained as required by 7 AAC 78.250, which includes the following obligations:
    - i. retaining and preserving financial and administrative grant records, including records of the receipt and disposition of grant income that are necessary to meet auditing requirements, for at least three years. Such records shall be retained longer, all as set forth at 7 AAC 78.250, if:
      - (A) An audit is in progress or audit findings, litigation, or claims involving the records are pending; or
      - (B) The records pertain to non-expendable personal property of the grant project.
    - ii. retaining and preserving records that relate directly to the care and treatment of a recipient of services for at least seven years following the termination of services to that recipient, subject to the following:
      - (A) any additional obligations required by AS 18.20.085 for hospital records;
      - (B) if a minor's care is at issue and the grantee is not a hospital already subject to AS 18.20.085, retaining and preserving records that relate directly to the care and treatment of a minor for at least seven years after the minor has reached the age of majority or until seven years after the termination of services, whichever is longer.

- 5. Storage and Transfer of Records.
  - a. If a grantee's business or organization closes or ceases to exist as a service provider under the grant, or if the records must be transferred for any other reason, the grantee must notify the contact person named in Item 10.b. of the Grant Agreement within 48 hours of such decision. The notice shall:
    - i. be signed by the grantee's board of directors or chief executive officer;
    - ii. indicate whether the grantee will retain and store its records in an appropriate, secure fashion or transfer its records to a continuing board, another organization, or to DHSS; and
    - iii. include a formal plan for the retention or transfer of records that provides:
      - (A) a description of how and when the grantee will notify each recipient of services regarding where the files will be transferred or stored and how the recipient can continue to receive services and obtain a copy of the recipient's records;
      - (B) a complete list of all files being transferred or stored; and
      - (C) a complete list of all recipients who will be sent the notice.
  - b. A grantee that is storing or transferring records must also:
    - i. box all paper records, ensuring:
      - (A) financial and operating records are in separate boxes from treatment records; and
      - (B) as it pertains to treatment records, records of minors are in separate boxes from records of adults.
    - ii. contact the contact person named in Item 10.b. of the Grant Agreement for instructions regarding the transfer of electronic records.
  - c. If the grantee is a federally assisted substance abuse treatment program, the grantee shall follow the procedures for disposition of records set forth at 42 C.F.R. § 2.19. If a specific requirement of 42 C.F.R. Part 2 conflicts with a requirement of these procedures, the grantee shall follow the requirements of 42 C.F.R. § 2.19 as it pertains to any such conflict.

### Exhibit 1 - Appendix C STATE OF ALASKA

#### TOTAL THAND COCIAL CEDVICES

	N	MENT OF HEALTI	Assurance F	orm		
	Salvage/Surplus	Destruction	XXXX Other: Re-use			
Technical Contact Information						
Provider or Grantee Agency Name:		Provider/Grantee Technic	cian Contact Name:	Phone #		
Computer or Drive Information (or attach list)						
Computer Make:	Computer Model #:	Computer S/N #:	Drive Model #:	Drive Make #:	Drive S/N #:	
Provider/Grantee Authorizing Officer Contact Information						
Provider or Grantee Authorizing Officer Name:					Phone #:	
Terms and Conditions						
any Department data or data acquired in the performance of services on behalf of the Department from the device, prior to being re-used, salvaged, surplussed, or disposed of. The Department further requires:  Re-used/Salvage/Surplus Devices:  A three (3) pass random wipe, where each sector of a disk is erased and written to a minimum of three times. A DoD 5220-22.M compliant wipe utility can be provided to you by contacting the Department's ITS Help Desk at: 1-888-484-5763 or emailing to HelpDesk@alaska.gov.  The Media Disposal Assurance Form signed by the Technician performing the electronic wipe and by the Authorizing Officer of the Provider/Grantee Agency confirming the required action.  A copy of the completed Media Disposal Assurance Form is submitted to the Grants & Contracts Support Team Offices.  Disposal of Devices:						
<ul> <li>A three (3) pass random wipe, where each sector of the disk is erased and written to a minimum of three times.</li> <li>Or</li> <li>The device destroyed in such a manner that the media is not recoverable         <ul> <li>Removal Media – Magnetic Media Cut or Severed</li> <li>Hard drives – Magnetic Platters Drilled or removed and broken</li> </ul> </li> <li>The Media Disposal Assurance Form signed by the Technician performing the electronic wipe and by the Authorizing Officer of the Provider/Grantee Agency confirming the required action</li> <li>A copy of the completed Media Disposal Assurance Form is submitted to the Grants &amp; Contracts Support Team Offices.</li> </ul>						
I hereby certify the terms and conditions for the Media Disposal Assurance has been met for the device(s) listed above.  Technician  Date: Signature:						
Authorizing Officer Date: Signature:						

DHSS ITS Help Desk • Anchorage phone (907) 269-3444 • Fairbanks phone (907) 451-3125 • Juneau phone (907) 465-8200 • Statewide phone 888-484-5763 • Email: <a href="mailto:HelpDesk@alaska.gov">HelpDesk@alaska.gov</a> Exhibit 1

## Exhibit 2 - Appendix C NOTIFICATION OF SUSPECTED BREACH

Provider or Grantee Organization Name:					
Provider or Grantee Address:					
Provider or Grantee Contact Person:					
Provider or Grantee Contact Person's Telephone Number:					
Identify the suspected or actual breach of security, intrusion, or unauthorized use or disclosure of grant recipient information (Please be as specific as possible and include names, dates, times, and specific actions or concerns. Use the other side of this form if you need more room. Attach any relevant documents.)					
Attached documents include:					
Identify actions taken or to be taken to remedy the suspected or actual breach:					